BUILDING & NEIGHBORHOOD SERVICES

Franklin, Tennessee 37065

JOHN C. SCHROER Mayor

GARY N. LUFFMAN Director

ERIC STUCKEY Administrator

HOMEOWNER PERMIT AFFADAVIT

Name:		
Address:		
City:Zip:	Phone No.:	
Description of work:		
Value of Work (all labor and materials):		
I verify that I am the homeowner of the proper named work at this location. I verify that this I		
I understand that when I obtain a permit to decontractor and that I am responsible for all wor		
I verify that I understand the basic principles o	of the work for which I am	seeking a permit to accomplish.
I understand that I cannot sub-contract or hire homeowner's permit and that I must physical these fields is permissible when they obtain that while I am acting as my own contractor parties associated with the work.	lly accomplish work in the he permit for the work in	ese fields myself. Hiring of contractors in their company name. I further understand
I acknowledge that I have received a hand-out inspections.	t from the Codes Departm	ent which outlines the call-in procedure for
I declare that I have read the foregoing, that accurate and that invalid information can combut not limited to a loss of my certificate of occ	stitute fraud, subject to pe	ermit revocation and legal action, including
Signature:	Date	:
	Date:	
STATE OF TENNESSEE (COUNTY OF WILLIAMSON	ss:	
Personally appeared before me acquainted, (or proved to me on the basis acknowledged themselves and executed the for		
Sworn to and subscribed before me this	day of	
Notary Public My commission expires:		(SEAL)
wry commission expires:		(SEAL)